



COPY OF PAPERS  
ORIGINALLY FILED

2661  
Docket No. 22962-7005

**Certificate of Mailing/Transmission (37 C.F.R. § 1.8(a)):**

[ X ] Pursuant to 37 C.F.R. § 1.8, I hereby certify that this paper and all enclosures are being deposited with the United States Postal Service as first class mail on the date indicated below in an envelope addressed to the Assistant Commissioner for Patents, Washington D.C. 20231.

[ ] Pursuant to 37 C.F.R. § 1.6(d), I hereby certify that this paper and all enclosures are being sent via facsimile on the date indicated below to the attention of Examiner \_\_\_\_\_ at Facsimile No. \_\_\_\_\_ at \_\_\_\_\_ a.m./p.m.

Dated: 12-12-01 Name of Person Certifying: Pam Pascual  
Printed Name: Pam Pascual

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Bristow, et al. Assignee: Televoke, Inc.  
Filing Date: April 17, 2001 Examiner: Not Assigned  
Serial No.: 09/837,736-738 Group Art Unit: 2661  
Title: **SOFTWARE AND PROTOCOL STRUCTURE FOR AN AUTOMATED  
USER NOTIFICATION SYSTEM**

Commissioner for Patents  
Washington, D.C. 20231

**RESPONSE & FEE TRANSMITTAL**

Sir:

Enclosed herewith for filing are the following:

- ☒ A Preliminary Amendment [ 1 ] page(s)  
☐ A Response to Restriction Requirement under 35 USC § 121 [ ] page(s)  
☐ An Amendment Under 37 CFR § 1.111 [ ] page(s)  
☐ An Amendment Under 37 CFR § 1.116 [ ] page(s)  
☐ Other \_\_\_\_\_ [ ] page(s)

Also included are:

- ☐ A Petition for Extension of Time [ ] months [ ] page(s)  
☐ Information Disclosure Statement  
[ ] page(s) of PTO-1449 [ ] copies of IDS citations  
☐ Applicant(s) claim Small Entity Status under 37 CFR § 1.27.  
☐ Other: \_\_\_\_\_  
☒ Return Postcard

RECEIVED

FEB 14 2002

Technology Center 2600

RECEIVED

MAR 01 2002

Technology Center 2600

RECEIVED  
FEB 22 2002  
TC 2600 MAIL ROOM

Fee Calculation						
<input type="checkbox"/> The following fees are submitted:						CALCULATIONS
EXTRA CLAIMS FEE				OTHER THAN SMALL ENTITY	SMALL ENTITY	\$
CLAIMS	CURRENT #	# OF CLAIMS PREVIOUSLY PAID	# EXTRA	RATE	RATE	
Total Claims	100- 20	100	0	× \$18.00	× \$9.00	\$0.00
Independent claims	8- 3	8	0	× \$84.00	× \$42.00	\$0.00
MULTIPLE DEPENDENT CLAIM(S)						
<input type="checkbox"/> Yes <input type="checkbox"/> No				\$280.00	\$140.00	\$0.00
Petition for Extension of Time Fee (___ months)						\$0.00
OTHER FEES _____ (specify)						\$0.00
<b>TOTAL FEES =</b>						<b>\$0.00</b>

☒ Conditional Petition for Extension of Time: An extension of time is requested to provide for timely filing if an extension of time is still required after all papers filed with this communication have been considered.

☐ A check in the amount of \$ \_\_\_\_\_ to cover the above fees is enclosed.

☐ Please charge Deposit Account No. 50-1193, Docket No. \_\_\_\_\_, in the amount of \$ \_\_\_\_\_ to cover the above-fees. *A duplicate copy of this sheet is enclosed.*

☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-1193, Docket No. 22962-7005. *A duplicate copy of this sheet is enclosed.*

DATE: 12/12/01 -- Respectfully submitted,

By: David G. Beck  
Registration No.. 37,776

McCutchen, Doyle, Brown & Enersen, LLP  
Three Embarcadero Center  
San Francisco, California 94111  
Telephone: (415) 393-2000  
Telefax: (415) 393-2286